MIAMI-DADE HIV/AIDS PARTNERSHIP

WELCOME

Thank you for attending today's

Strategic Planning Committee Meeting

Please sign in to have your attendance recorded.

Scan the QR Code for meeting materials.

Scan for Meeting Documents

MIAMI-DADE HIV/AIDS PARTNERSHIP

Strategic Planning Committee

Tuesday, July 22, 2025
9:30 AM – 11:30 AM

Behavioral Science Research Corp.
2121 Ponce de Leon Boulevard, 2nd Floor Conference Room
Coral Gables, FL 33134

AGENDA

I.	Call to Order	Stephanie Stonestreet
II.	Introductions	All
III.	Meeting Housekeeping	Stephanie Stonestreet
IV.	Floor Open to the Public	Angela Machado
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of June 10, 2025	All
VII.	Reports ▪ Membership ▪ Partnership	Staff
VIII.	Standing Business ▪ 2024 Annual Report – State of the HIV Epidemic	All
IX.	New Business ▪ 2022-2026 Integrated Plan Monitoring and Reporting System Report ▪ 2027-2031 Integrated Plan Review	All
X.	Announcements and Open Discussion	All
XI.	Next Meeting: August 12, 2025, 9:30 AM at BSR Corp.	Angela Machado
XII.	Adjournment	Stephanie Stonestreet

Please mute or turn off all cellular devices.

For more information about the Strategic Planning Committee, please contact Christina Bontempo, (305) 445-1076 x106 or cbontempo@behavioralscience.com.

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Meeting Guide

Meetings can be fast-paced and confusing!
These terms and acronyms can help you follow along.
Please raise your hand at any time if you need more information!

Partnership, PC, or Planning Council	**The Miami-Dade HIV/AIDS Partnership - Official Ryan White Program Planning Council in Miami-Dade County**
RWP or RWHAP	**The Ryan White Program or The Ryan White HIV/AIDS Program (Usually referring to Part A/MAI).**
ADAP	AIDS Drug Assistance Program. Provides FDA-approved medications for low-income individuals with HIV who have limited or no coverage from private insurance or Medicaid. Provides insurance coverage for uninsured RWP clients.
BSR	Behavioral Science Research Corp. (aka, Staff).
EHE	Ending the HIV Epidemic: A Plan for America. Four Pillars: 1. Diagnose, 2. Treat, 3. Prevent, 4. Respond.
EMA	Eligible Metropolitan Area (locally, Miami-Dade County).
FDOH or FDOH-MDC	Florida Department of Health in Miami-Dade County.
FPL	Federal Poverty Level. Used to determine RWP eligibility and benefits.
HOPWA	Housing Opportunities for People with AIDS Program. Federal program that provides funding to support housing and housing-related services for people with AIDS and their families. Related terms: **STRMU**: Short-Term Rental, Mortgage and Utilities Assistance; Project-based: Funds designated units in a building; **LTRA**: Long-Term Rental Assistance (voucher program); and **FMR**: Fair Market Rents.
HRSA	The Health Resources and Services Administration. The source of federal RWP grant funds.
Integrated Plan or IP	The Miami-Dade County Integrated HIV Prevention and Care Plan.
JIPRT	The Joint Integrated Plan Review Team (Prevention Committee & Strategic Planning Committee).
MAI	Minority AIDS Initiative. Additional RWP funding to improve access to HIV care and health outcomes for disproportionately affected racial and ethnic minority populations.
NHAS	National HIV/AIDS Strategy. Four Goals: 1. Prevent new HIV infections; 2. Improve HIV-related health outcomes of people with HIV; 3. Reduce HIV-related disparities and health inequities; 4. Achieve integrated, coordinated efforts that address the HIV epidemic among all partners.
PE-Miami or Provide Enterprise	Provide Enterprise® by Groupware Technologies (RWP client database system).
The Recipient, The County, or OMB	The Miami-Dade County Office of Management and Budget. The Recipient of RWP Part A/MAI funds from HRSA.
TTRA	Test and Treat/Rapid Access. Protocol designed to ensure newly diagnosed people or those returning to care will obtain immediate linkage to medical care and treatment.

More terminology at www.aidsnet.org/the-partnership/#getonboard1.

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MIAMI-DADE HIV/AIDS PARTNERSHIP

Meeting Housekeeping Strategic Planning Committee

Created by *Behavioral Science Research*

Updated July 21, 2025

Disclaimer and Code of Conduct

- Audio of this meeting is being recorded and will become part of the public record.
- Members serve the interest of the Miami-Dade HIV/AIDS community as a whole.
- Members do not serve private or personal interests, and shall endeavor to treat all persons, issues and business in a fair and equitable manner.
- Members shall refrain from side-bar conversations in accordance with Florida Government in the Sunshine laws.

General Housekeeping

- You must sign in to be counted as present.
- Place cell phones on mute or vibrate - *If you must take a call, please excuse yourself from the meeting.*
- Eligible committee members and applicants should see staff for a travel expense offset at the end of the meeting.
- See staff after the meeting if you are interested in membership or if you have a question that wasn't covered during the meeting.

About the Partnership

- The Miami-Dade HIV/AIDS Partnership is the official Ryan White Program Planning Council for Miami-Dade County.
- Partnership Members are appointed by the Mayor of Miami-Dade County based on recommendations by the Community Coalition.
- The Strategic Planning Committee is one of six Standing Committees of the Partnership.
- Strategic Planning Committee members also serve on the Joint Integrated Plan Review Team (JIPRT).
- All Partnership and Standing Committee members are volunteers and commit to abiding by the Partnership's Bylaws, including regular meeting attendance and completion of required training and paperwork.
- See staff after the meeting for additional details.

Meeting Participation

Everyone has a role to play!

- All attendees may address the board as time allows and at the discretion of the Chair.
- Please *share your expertise* on the current Agenda topics and motions. Remember to . . .
  - Raise your hand to be recognized by the Chair or added to the queue during discussions.
  - Avoid repeating points previously addressed.
- Only Strategic Planning Committee members vote at today's meeting.
- Announcements can be made at the end of the meeting as time allows. Announcements should inform or educate the community and must not be used to advance personal interests or any form of financial gain.

Language Matters!

In today's world, there are many words that can be stigmatizing. Here are a few suggestions for better communication.

Remember **People First** Language . . .
People with HIV, ***People*** with substance use disorders, ***People*** who are experiencing homelessness, etc.

Please don't say **RISKS** . . . Instead, say **REASONS.**
Please don't say, **INFECTED with HIV** . . . Instead, say **ACQUIRED HIV, DIAGNOSED with HIV,** or **CONTRACTED HIV.**

Please **do not** use these terms . . .

Dirty . . . Clean . . . Full-blown AIDS . . . Victim . . .

Meeting Terminology

Meetings can be fast-paced and confusing!

- Terms and acronyms you might hear at today's meeting are on the back of your Agenda.
- Please raise your hand at any time if you need more information!

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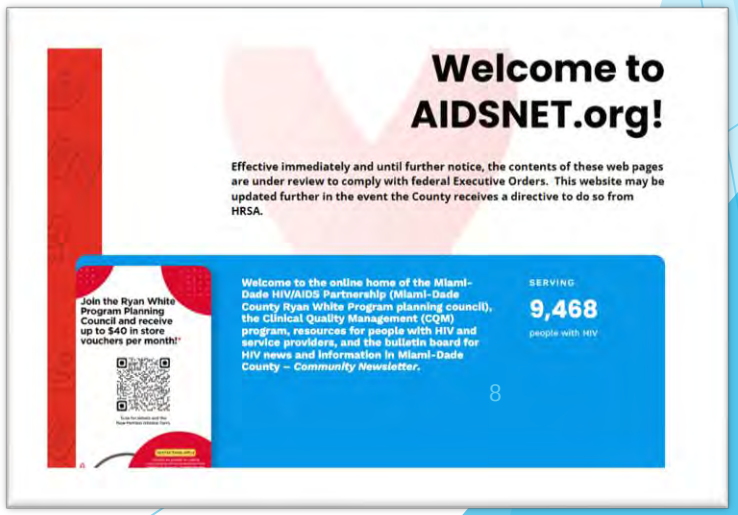
Resources

- Behavioral Science Research Corp. (BSR) staff are the Resource Persons for this meeting.
- See staff after the meeting if you are interested in membership or if you have a question that wasn't covered during the meeting.
- Today's presentation and supporting documents are online at www.aidsnet.org/the-partnership/, or by scanning the QR code on your agenda.



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Floor Open to the Public

Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any item on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record before you talk about your concerns.

BSR has a dedicated line for statements to be read into the record.

(No statements were received.)

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Strategic Planning Committee
Behavioral Science Research Corp.
2121 Ponce de Leon Boulevard, Suite 240, Coral Gables, FL 33134
June 10, 2025 Minutes

#	Members	Present	Absent
1	Edwards, Shawneaqua	x	
2	Gonzalez, Nilda		x
3	Machado, Angela	x	
4	Poblete, Karen	x	
5	Singh, Hardeep		x
6	Stonestreet, Stephanie	x	
	Quorum = 3		

Guests	
Gonzalez De Obando, Tivisay	
Mejias, Thaydee	
Valle-Schwenk, Carla	
Staff	
Bontempo, Christina	
Ladner, Robert	

Note: All documents referenced in these minutes are on file and were accessible to members and the public prior to and during the meeting, at www.aidsnet.org/the-partnership#strategicplanning1.

I. Call to Order

Committee Chair, Stephanie Stonestreet, called the meeting to order at 9:49 a.m.

II. Introductions

Members, guests, and staff introduced themselves.

III. Housekeeping/Meeting Rules

Attendees took turns reading the *Meeting Housekeeping* PowerPoint slides, which included general reminders, code of conduct, people-first language, information about the Partnership, and meeting participation best practices.

IV. Floor Open to the Public

Ms. Stonestreet opened the floor to the public with the following statement:

Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any item on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record before you talk about your concerns. BSR has a dedicated telephone line as well as a general email address for statements to be read into the record. No statements were received via the telephone line or email.

There were no comments, so the floor was then closed.

V. Review/Approve Agenda

Members reviewed the agenda and approved it as presented.

Motion to approve the agenda as presented.

Moved: Karen Poblete **Seconded: Shawneaqua Edwards** **Motion: Passed**

VI. Review the Minutes of April 24, 2025

Members reviewed the minutes of April 24, 2025, and approved the minutes with no changes.

Motion to approve the minutes of April 24, 2025, as presented.
Moved: Angela Machado **Seconded: Shawneaqua Edwards** **Motion: Passed**

VII. Reports

- **Membership**

Ms. Stonestreet announced that there are still significant vacancies on the committee and the Partnership. The committee membership application has been updated to comply with federal executive orders. The revised application was reviewed by the Community Coalition and is posted online.

- **Partnership**

Ms. Stonestreet announced that the Partnership met on May 12 and approved several motions, including two motions from Strategic Planning: 1) approval of the Partnership Assessment of the Recipient Administrative Mechanism; and 2) approval the Subrecipient Assessment of the Recipient Administrative Mechanism. The complete Partnership Report to Committees is posted online. The next Partnership meeting is scheduled for July 7 at the Downtown Library.

VIII. Standing Business

- **Integrated Planning Schedule**

Staff presented a sample of the Integrated Plan Monitoring and Reporting System (IPMRS) database which has replaced the VMSG database. The IPMRS is still undergoing updates to bring activities into compliance with federal executive orders. Also, the system needs to be updated to track the progress on achieving objectives, not just the progress on activities. Members concurred with the design and functionality of the IPMRS.

In July, members will be able to review the 2022-2026 Plan data through June 2025 and begin reviewing the narrative sections of the 2027-2031 Plan.

In October, the meeting will be three hours and will be dedicated to development of the 2027-2031 Plan. The 2027-2031 Plan is currently due in June 2026.

There is some concern expressed on the access to prevention data in the future due to changes in data collection and availability from the Florida Department of health (Tallahassee). Getting data directly from service providers may be an option to explore.

Staff announced that the Miami-Dade County Board of County Commissioners is interested in revisiting recommendations in the Getting to Zero plan issued in 2018.

It would be helpful to have a list of programs by their funding sources since there are funding streams outside the purview of federal and state funding. It was noted that Prevention 305 is continuing HIV testing without interruption; early intervention services are ongoing through General Revenue funding; and the Miami Foundation has a donor group to focus on the LGBTQ community.

- **2024 Annual Report – State of the HIV Epidemic – Preliminary Report**

Due to time constraints, members only had time for a brief review of the first draft of the 2024 Annual Report. Several changes and recommendations were suggested, as detailed below. Staff will bring an updated version to the July meeting for thorough review and editing.

- Page 2: Include the "2024 data by Zone" map since this is more up to date than the "2022 data by Zip Code" map.
- Page 9: Indicate that funding is to be discontinued for condom distribution.
- Page 11: Carla Valle-Schwenk will provide updated Test & Treat/Rapid Access data.
- Page 13: This page should emphasize how proposed budget cuts will impact Miami-Dade County and should include an infographic for further emphasis.
- Page 13: Move the "Other Ways . . ." section to the back page; update the section to highlight the need for stigma reduction; and the importance of normalizing HIV testing.

- **FY 2024-2025 Assessment of the Recipient Administrative Mechanism – Preliminary Report**

Members reviewed the preliminary Assessment of the Recipient Administrative Mechanism survey results, including the general and open-ended feedback, and responses to the prompt to detail concerns and suggest solutions for "Disagree" or "Strongly disagree" responses. As in previous years, there were few solutions to noted concerns. In the next survey, members will again address how to modify this question in order to solicit meaningful responses. The complete report, including responses to comments by the Recipient and Groupware Technologies, will be provided at a future meeting.

Prior to New Business, Ms. Stonestreet called for a motion to extend the meeting by 10 minutes.

Motion to extend the meeting by 10 minutes.
Moved: Angela Machado **Seconded: Shawneaqua Edwards** **Motion: Passed**

IX. New Business

- **Resolution to the Miami-Dade County Mayor and Board of County Commissioners**

An excerpt of the May 12, 2025, Partnership meeting minutes was distributed regarding proposed state and federal budget cuts. Assistant County Attorney, Terrence A. Smith, offered to help draft a resolution addressing the impact of the cuts to the Mayor and Board of County Commissioners. The Strategic Planning Committee's responsibilities include drafting recommendations and reacting to legislative and regulatory issues regarding funding, policies and rule changes related to HIV/AIDS and Ryan White Program reauthorization. The Committee's recommendations will be forward to ACA Smith.

Below are key points for consideration:

- Care and Treatment
  - 29,453 people in Miami-Dade County are living with HIV (2024).
  - The Ryan White Program served 9,388 people in 2024.
  - 4,430 Ryan White Program clients live at or below 135% of the Federal Poverty Level.
  - People with HIV represent one out of every 93 people living in Miami-Dade County (2024).
  - There will be fewer Affordable Care Act plans in the next Fiscal Year which is anticipated to put an additional financial burden to the Ryan White Program.
  - *Funding cuts of greatest concern:*
    - Elimination of Minority AIDS Initiative funding: $2.6 million cut locally. FY 2024 MAI services, expenditures and clients served, including Medical Case Management,

$789,709; 1,138 people served; Mental Health Therapy/Counseling, $2,990; 38 people served; and Outpatient/Ambulatory Health Services (doctor visits), $936,550; 693 people served.

- □ Elimination of Ending the HIV Epidemic care and treatment funding: $4.4 million locally, including telehealth, HIV Test and Treat/Rapid Access, and housing support.
- □ Elimination of the Ryan White Program Part F; $74 million cut nationally, including oral health care for people with HIV and education and training for health care providers.
- □ Cuts to Substance Abuse and Mental Health Services Administration (SAMHSA) funding, $1,065 billion nation-wide. Data on impacts of local cuts to research and direct services are still being gathered. *It should be stressed that there is a nationwide mental health crisis*.
- □ Merging the Housing Opportunities for Persons With AIDS (HOPWA) Program funding with Section 8 and other housing funding; $532 million in nationwide funding. *It is vital that housing funds include specific support for people living with HIV/AIDS.*

- Prevention
  - □ Miami-Dade County has the highest rate of new HIV diagnoses of any county in Florida.
  - □ Florida Department of Health High Impact Prevention (HIP) funding ends June 30, 2025.
    - The Florida Department of Health HIV/AIDS Section released RFA 24-003 to expand HIV funded prevention services with a potential allocation up to $2,280,000 for Area 11A; application deadline is June 16, 2025; and the anticipated award date is July 31, 2025.
  - □ Ending the HIV Epidemic (EHE) prevention funding contracts ended May 31, 2025.
    - EHE funding is proposed to be eliminated as part of the 2026 Federal budget cuts.
    - EHE services include HIV testing, education, outreach, and Pre-Exposure Prophylaxis (PrEP).
    - This represents a $2.6 million cut to local prevention funding.

X. Announcements and Open Discussion

Staff announced Annual Needs Assessment meetings, beginning June 12, 2025.

XI. Next Meetings

Ms. Machado announced the next scheduled meeting date is Tuesday, July 22 at 9:30 a.m. at Behavioral Science Research Corp.

XII. Adjournment

Ms. Stonestreet adjourned the meeting at 11:40 a.m.

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MIAMI-DADE HIV/AIDS PARTNERSHIP

Membership Report

July 8, 2025

The Miami-Dade HIV/AIDS Partnership

The official Ryan White Program Planning Council in Miami-Dade County and the Advisory Board for HIV/AIDS to the Miami-Dade County Mayor and Board of County Commissioners.

Opportunities for Ryan White Program Clients

5 *seats are available to Ryan White Program Clients who are not affiliated or employed by a Ryan White Program Part A funded service provider.*

Opportunities for General Membership

7 *seats are open to people with HIV, service providers, and community stakeholders who have reputations of integrity and community service, and possess the relevant knowledge, skills and expertise in these membership categories:*

Hospital or Health Care Planning Agency Representative
Mental Health Provider Representative
Housing, Homeless or Social Service Provider
Other Federal HIV Program Grantee Representative (Part F)
Other Federal HIV Program Grantee Representative (SAMHSA)
Non-Ryan White Program Miami-Dade County Representative
Part D Grantee Representative

Are you a Member?

Thank you for your service to people with HIV!
Be sure to bring a Ryan White client to your next meeting!

Do You Qualify for Membership?

If you answer "Yes" to these questions, you could qualify for membership!

Are you a resident of Miami-Dade County?

Are you a registered voter in Miami-Dade County?
Note: Some seats for people with HIV are exempt from this requirement.

Can you volunteer three to five hours per month for Partnership activities?

Get Started Today!
Scan the QR Code or contact
mdcpartnership@behavioralscience.com.

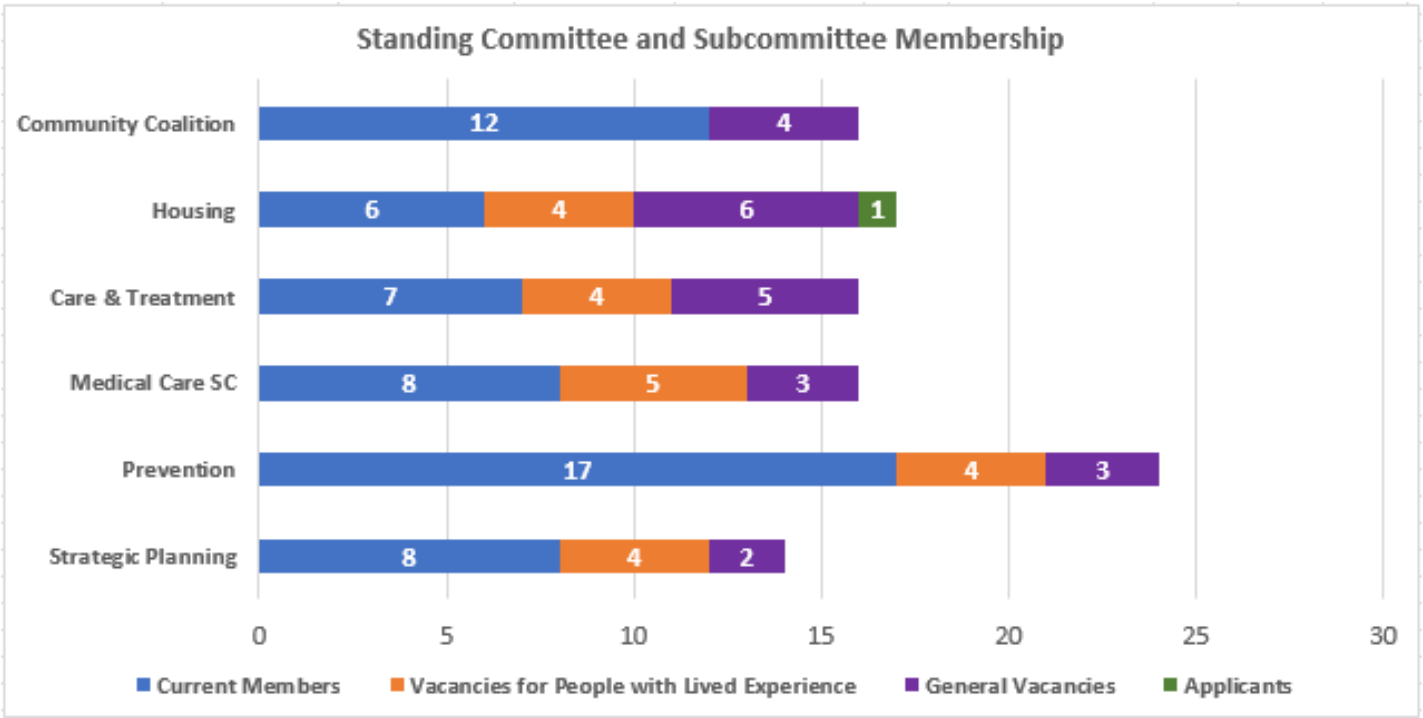
MEMBERSHIP

Committees

Work with a dedicated team of volunteers on these and more Partnership activities to better serve people with HIV in Miami-Dade County!
People with HIV are encouraged to join!

- Allocate more than $27 million in Ryan White Program funds with the **Care and Treatment Committee**
- Develop an Annual Report on the State of HIV and the Ryan White Program in Miami-Dade County with the **Strategic Planning Committee**
- Recruit and train new Partnership members with the **Community Coalition**
- Work with the City of Miami Housing Opportunities for Persons with AIDS Program to address housing challenges for people with HIV/AIDS with the **Housing Committee**
- Oversee updates and changes to medical treatment guidelines for the Ryan White Part/ MAI Program with the **Medical Care Subcommittee**
- Set priorities for Ryan White Program HIV health and support services in Miami-Dade County with the **Care and Treatment Committee**
- Share a meal and testimonials at Roundtables with the **Community Coalition**
- Develop and monitor the official HIV Prevention and Care Integrated Plan with the **Strategic Planning Committee** & **Prevention Committee**
- Develop your leadership skills and be a committee leader with the **Executive Committee**
- Oversee updates and changes to the Ryan White Prescription Drug Formulary with the **Medical Care Subcommittee**
- Develop and monitor local Ending the HIV Epidemic activities with the Florida Department of Health in Miami-Dade County with the **Prevention Committee** & **Strategic Planning Committee**
- Be in the know about the latest HIV activities of the Prevention Mobilization Workgroups with the **Prevention Committee**

Visit www.aidsnet.org/the-partnership/ for the complete list of applications and details on Partnership and committee membership opportunities. Contact us at mdcpartnerhsip@behavioralscience.com or 305-445-1076 for assistance.



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For more information about the Strategic Planning Committee, please contact Christina Bontempo, (305) 445-1076 x106 or cbontempo@behavioralscience.com.

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DRAFT

2024 ANNUAL REPORT

HIV in Miami-Dade County

www.aidsnet.org

mdcpartnership@behavioralscience.com

Notes

- Data in this report are subject to change.
- Ryan White Program Fiscal Year 2024: March 1, 2023 - February 28, 2024.

Data Sources

- www.AIDSVu.org.
- Florida Health CHARTS.
- Florida Department of Health in Miami-Dade County (FDOH-MDC).
- Florida Department of Health Epidemiological Data.
- www.HIV.gov.
- Miami-Dade County Ryan White Program.
- Provide® Enterprise Miami (data management system utilized by the Ryan White Program Part A/Minority AIDS Initiative and Part B in Miami-Dade County).
- US Census.

Special thanks to Miami-Dade HIV/AIDS Partnership Strategic Planning Committee members for the development of this report. Members make the difference!

This publication is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H89HA00005, CFDA #93.914 – HIV Emergency Relief Project Grants, as part of a Fiscal Year 2025 award totaling $12,483,728 as of May 7, 2025, with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, HRSA, HHS or the U.S. Government.

State of the HIV Epidemic

In 2024, people with HIV represented **one out of every 93** people living in Miami-Dade County.

2022 Florida Department of Health Snapshot

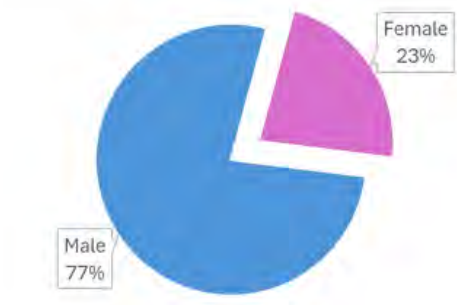
#1 Miami-Dade County has the highest rate of new HIV diagnoses of any county in Florida.

29,453 Total number of people with HIV living in Miami-Dade County.
Total 2024 Miami-Dade County population: 2,838,461, 1% of all residents. (US Census, July 2024)

23% Percent of Florida residents with HIV living in Miami-Dade County.
Total 2024 FL population: 23,372,215 (US Census, July 2024)

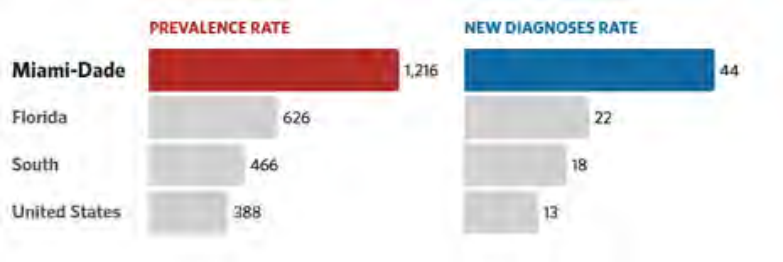
Sex of People with HIV in Miami-Dade County, 2024

Florida Department of Health



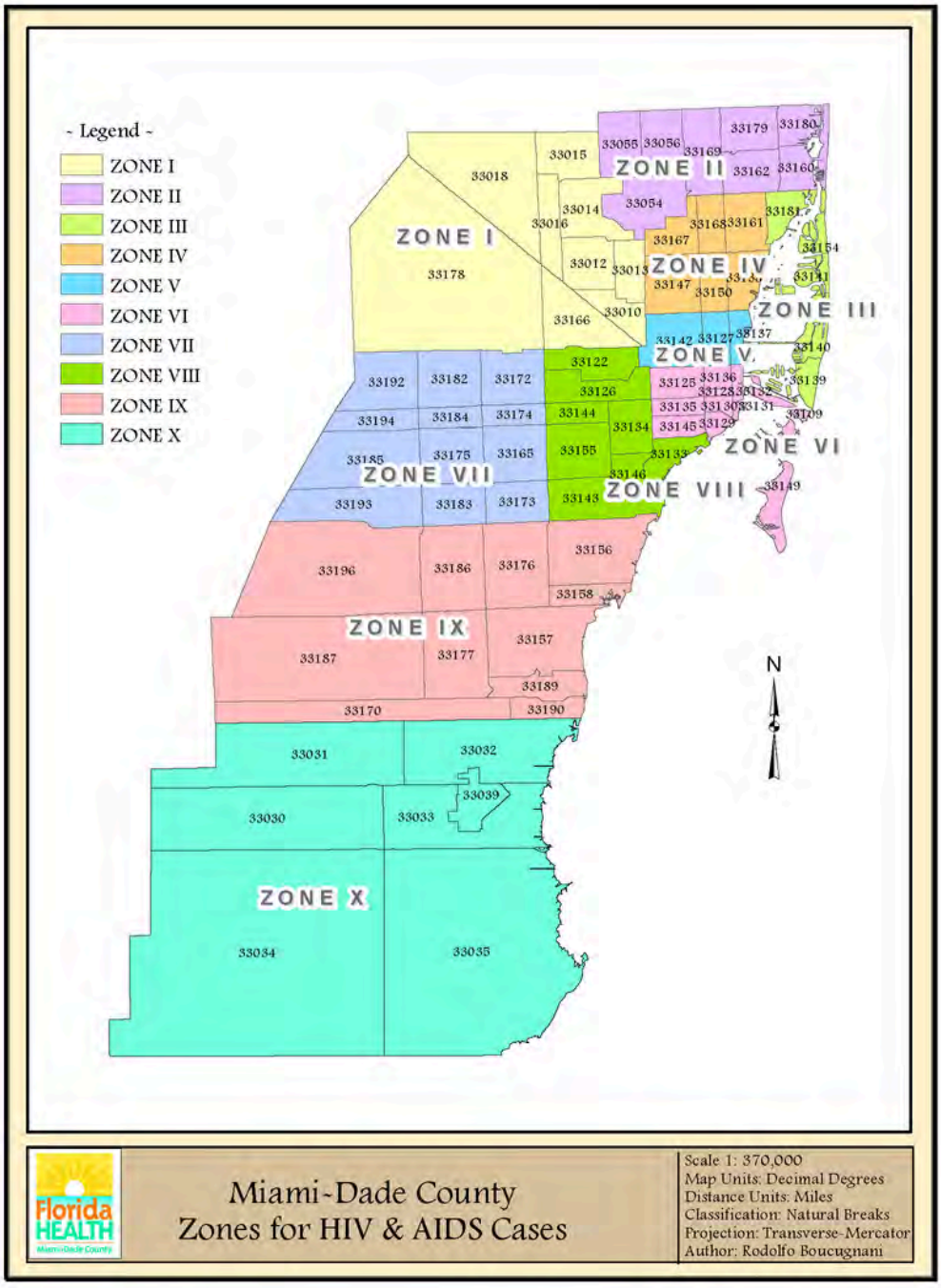
Location Comparison

HIV prevalence and HIV new diagnoses compared across geographic areas.
(AIDSVU.org. Rate per 100K, 2022; latest available data).



Geographic Distribution

Data are used to direct services to areas of greatest need.



Ryan White Program Clients and Service Provider Sites by Life Zone

Zone	Number of Clients	Number of Service Provider Sites
Zone 1	931	3
Zone 2	1,229	3
Zone 3	945	10
Zone 4	1,580	8
Zone 5	974	12
Zone 6	1,454	4
Zone 7	561	1
Zone 8	643	5
Zone 9	559	3
Zone 10	476	7

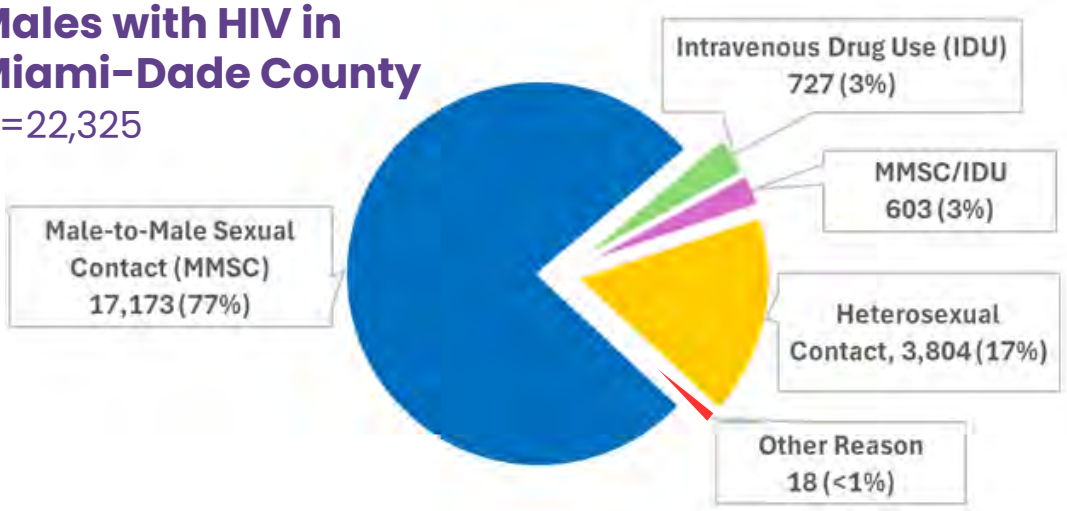
Modes of Acquiring HIV

In 2023, the Florida Department of Health reported the following modes of acquiring HIV among people in Miami-Dade County.

- All modes of transmission are self-reported.
- Other Reason includes reason not reported or identified, including hemophilia, blood transfusion, perinatal exposure, or missing/suppressed data.
- Persons who identified as transgender are not counted in the total.
- 2023 is the most recent data available from the Florida Department of Health.

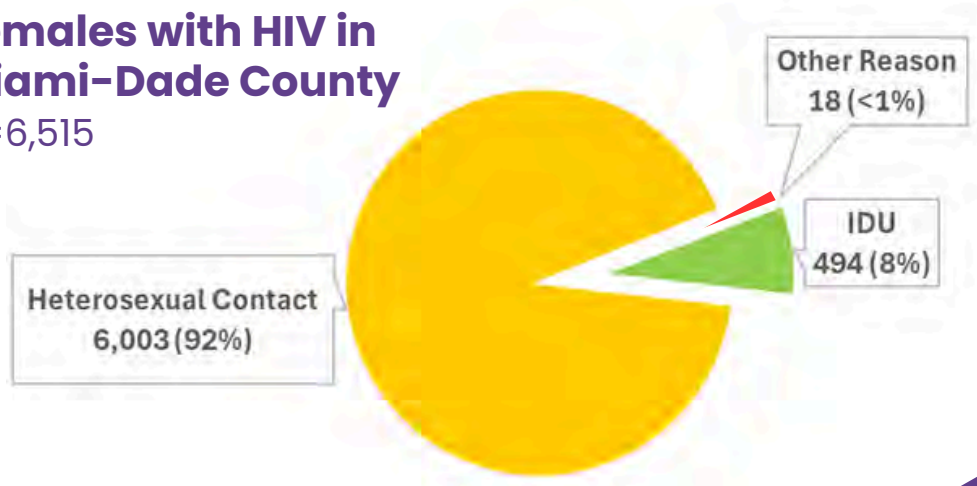
Males with HIV in Miami-Dade County

N=22,325



Females with HIV in Miami-Dade County

N=6,515



Populations of Special Concern

In Fiscal Year 2024, Miami-Dade County's Ryan White Program provided medical care and support services to **9,388 low-income people with HIV**.

Populations of special concern among Ryan White Program clients include people over 50 with HIV, long-term survivors, people with HIV experiencing homelessness and unstable housing, people living below 136% of the Federal Poverty Level, and people experiencing food insecurity.

People Over 50 with HIV and Long-Term Survivors

People with HIV over 50 and long-term survivors are more likely to have negative health outcomes due to lower cognitive functioning, diabetes, hypertension, and other co-occurring conditions.

16,822 People ~ Total number of people with HIV over age 50 in Miami-Dade County (FDOH, 2023).

3,855 People ~ Total number of Ryan White Program clients in care in Miami-Dade County in 2024 who were over age 50 and aging into Medicare ~ 41.1% of all clients in Ryan White Program care.

1,764 People ~ Total number of Ryan White Program clients in care in Miami-Dade County in 2024 who were Long-Term Survivors - living with HIV for 20 years or longer ~ 18.8% of all clients in Ryan White Program care.

The selection of June 5 for the annual observance of **HIV Long-Term Survivors Awareness Day** coincides with the anniversary of the first official reporting of what became known as the AIDS epidemic on June 5, 1981, when the CDC first reported on five cases of a mysterious disease affecting young gay men. June 5, 1981 is considered the start of the AIDS pandemic.

Populations of Special Concern

It is challenging to focus on healthcare when basic needs are not met. Maintaining effective HIV treatment is especially complicated for people with HIV who experience unstable housing or homelessness, food insecurity, poverty, or any combination of these social determinants of health.

Homelessness and Unstable Housing

671 Ryan White Program clients in care (7.1% of all Ryan White Program clients) experienced homelessness or were unstably housed in 2024.

For people with HIV who are living in poverty and attempting to become stably housed, the lack of affordable housing and rising Fair Market Rents continue to hinder treatment adherence and threaten positive health outcomes.

Food Insecurity

The Office of Disease Prevention and Health Promotion defines food insecurity as a household-level economic and social condition of limited or uncertain access to adequate food. In 2020, 13.8 million households nationwide were food insecure at some time during the year.

In Fiscal Year 2024-2025, the Ryan White Program Part A food bank helped **more than 900 Ryan White Program clients** experiencing food insecurity at a cost of **more than $1.6 million**.

Poverty

4,430 Ryan White Program clients (47.2% of all Ryclients) were living below 136% of the Federal Poverty Level (FPL) in 2024. The Federal Poverty Level is defined as Gross Household Income less than or equal to:

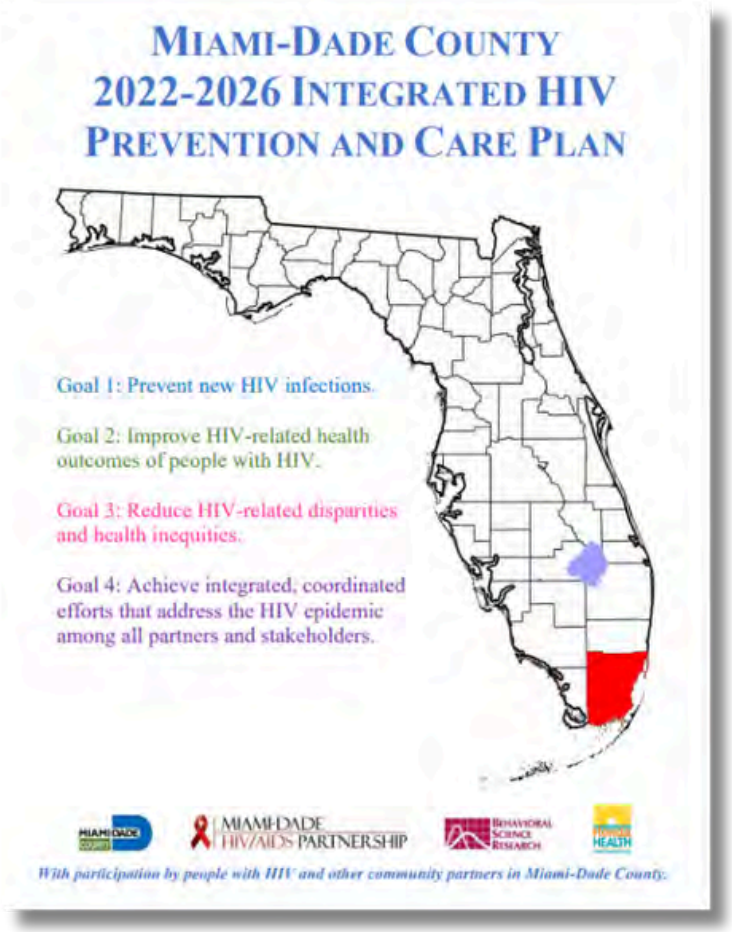
- $15,650-$21,283 for a family of 1
- $21,150-$28,763 for a family of 2
- $26,650-$36,243 for a family of 3
- $32,150-$43,723 for a family of 4

Miami-Dade County Response

Integrated Planning

Strategies and activities for achieving the National HIV/AIDS Strategy (NHAS) and Ending the HIV Epidemic (EHE) goals are detailed in the *2022-2026 Miami-Dade County Integrated HIV Prevention and Care Plan.*

Community Partners



- **The Miami-Dade HIV/AIDS Partnership**

  Ryan White Program Planning Council established by County Ordinance as the official County Advisory Board for HIV needs and services in Miami-Dade County.

  Providing coordination between people with HIV, including Ryan White Program clients, service providers, and administrators, Florida Department of Health in Miami-Dade County, government officials, the Housing Opportunities for Persons with AIDS Program (HOPWA), General Revenue, Medicaid, universities, hospitals, and HIV advocates.

- **The Ryan White Program**

  Ryan White Program Parts A, B, C, D, F, and the Minority AIDS Initiative (MAI).

  Providing life-saving HIV medical care and treatment and support services to **9,388** people with HIV in 2024.

- **The Florida Department of Health in Miami-Dade County**

  The local county health department, providing HIV and sexually transmitted disease testing and prevention services. More than **63,000** HIV tests were administered in 2024, with **648** HIV positive test results.

Miami-Dade County Response

Ending the HIV Epidemic

Miami-Dade County is one of 57 Ending the HIV Epidemic priority jurisdictions receiving funding for resources, technology, and expertise to expand HIV prevention, treatment, and support services. All residents with HIV - regardless of immigration status or income level - can benefit from these services.

Ryan White Program Ending the HIV Epidemic Initiatives

HealthTec ~ Enhancing telehealth services by applying a multidisciplinary approach to provide medical care, medical case management, mental health counseling, substance use disorder services, prescription drugs, and more!

Quick Connect

- Expanding the Test and Treat/Rapid Access protocol to ensure access to medical care and antiretroviral therapy within 7 days.
- Educating non-Ryan White Program-affiliated providers at hospitals and clinics on the benefits of routinized opt-out HIV testing.
- Engaging the community in HIV testing through social marketing and media campaigns.

Housing Stability Services ~ Housing is Healthcare ~ Providing transitional, short-term, or emergency housing assistance using a housing-first approach.

Mobile GO Teams ~ Supporting Miami-Dade County's ability to rapidly respond to HIV transmission clusters using the local Test and Treat/Rapid Access model.

Florida Department of Health in Miami-Dade County Ending the HIV

HIV Testing ~ Providing rapid HIV testing and at-home HIV testing.

Rapid Access to Care ~ Ensuring all persons who test positive for HIV will have medication to reach viral load suppression.

Pre-Exposure Prophylaxis (PrEP) ~ Increasing PrEP uptake and access points.

Re-engagement in Care ~ Getting people who have fallen out of care back into care.

Partner Services ~ Providing confidential partners services to individuals exposed to HIV, including HIV testing, and linkage to HIV treatment or Pre-Exposure Prophylaxis.

Academic Detailing ~ Educating hospitals and clinics on the benefits of routinized opt-out HIV testing.

Establishing a Referral Network ~ To connect people with HIV to care and services.

Media Campaigns ~ Engaging the community in HIV testing through social marketing and media campaigns throughout the county.

Miami-Dade County Response

HIV Innovations and Interventions

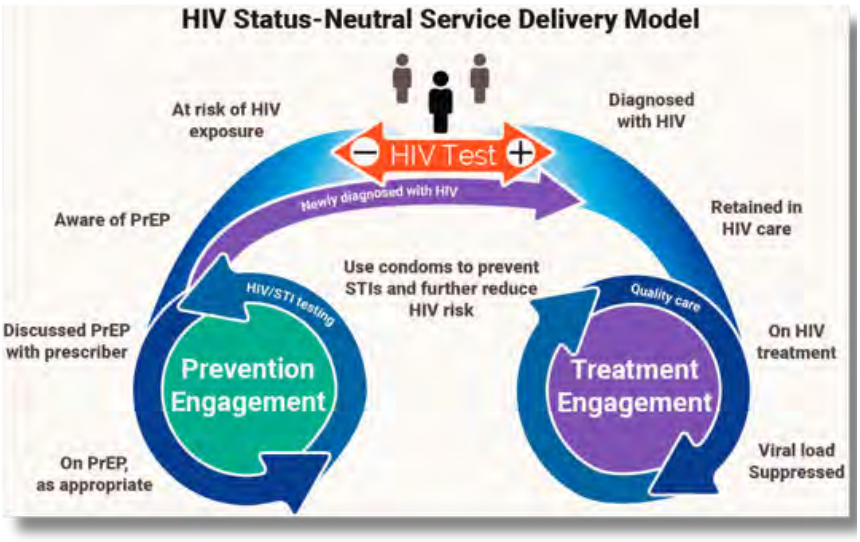
Infectious Disease Elimination Act

864 people were linked to IDEA Exchange services in 2023 (the latest available data).

HIV transmission via injection drug use was mitigated by the Infectious Disease Elimination Act - IDEA Exchange, an innovative Syringe Services Program, which started in December 2016 in Miami-Dade County and has become a statewide Syringe Services Program model.

HIV Status Neutral Service Delivery Model

The Miami-Dade County HIV Integrated Prevention and Care Plan includes activities to promote the CDC-recommended HIV Status Neutral Service Delivery Model, where HIV testing serves as an entry point to services regardless of a positive or negative HIV result, to improve HIV prevention and care outcomes.



Undetectable = Untransmittable ~ U=U

U=U means that a person with HIV who is on treatment and has an undetectable viral load cannot sexually transmit HIV.

The Miami-Dade HIV/AIDS Partnership is among 1,050 supporters from 105 countries who have signed on to share the U=U message.

Miami-Dade County Response

HIV Prevention Initiatives

TestMiami.org

The Florida Department of Health in Miami-Dade County in collaboration with the Centers for Disease Control and Prevention and Fast Track Cities, offers free HIV testing and free condoms throughout Miami-Dade County through the TestMiami.org campaign.

PrEP: Pre-Exposure Prophylaxis

For persons who test negative for HIV, PrEP offers comprehensive HIV prevention that involves the use of antiretroviral medications to reduce the risk of contracting HIV.

PEP: Post-Exposure Prophylaxis

For persons potentially exposed to HIV, taking antiretroviral medicines after exposure can prevent contracting HIV.

TelePrEP

Access PrEP through a mobile device or your computer.

PrEP Locator

Locate a PrEP in Miami-Dade County at www.preplocator.org, a national directory of providers of HIV PrEP in the U.S.

TestMiami.Org

Routine Opt-Out Testing

In 2023, the Florida Department of Health collaborated with **87 healthcare facilities** to offer routine opt-out testing, an increase of more than five times the number of facilities offering opt-out testing in 2022.

Free Condoms from FDOH

- **Community Distribution:** More than **2.2 million** free condoms were distributed in 2024 with the help of a broad variety of community partners, including bars and clubs, colleges and schools, faith-based organizations, and street outreach. Free condoms were also available at local health departments and via home delivery from: www.testmiami.org/map.html.

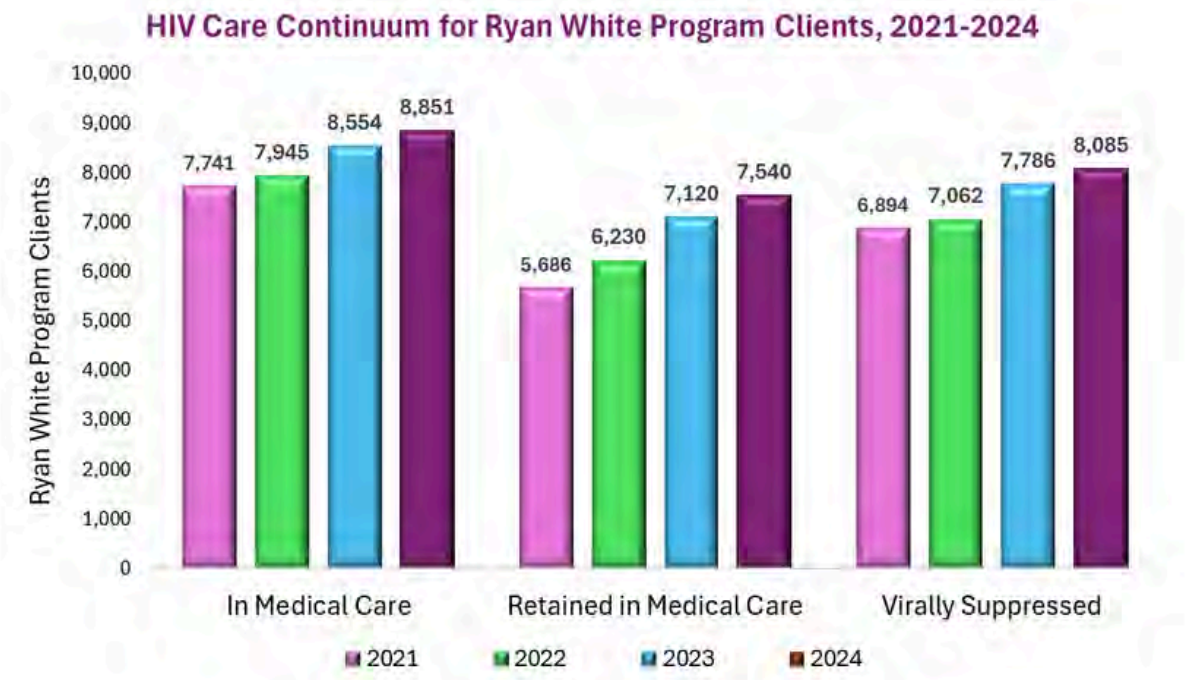
Funding for condoms has been discontinued, as of June 2025.

Successful Outcomes

Ryan White Program Care Continuum

Miami-Dade County's Ryan White Program continues to maintain clients in care and keep them virally suppressed.

Ryan White Program Part A/Minority AIDS Initiative



In Medical Care
At least one medical visit, a CD4 test, or viral load test in a 12 month period.

Retained In Medical Care
Two or more medical visits or viral load tests, at least 90 days apart in a 12 month period.

Virally Suppressed
Less than 200 copies of HIV per milliliter of blood.

Ryan White Part D Program

No Babies Born with HIV

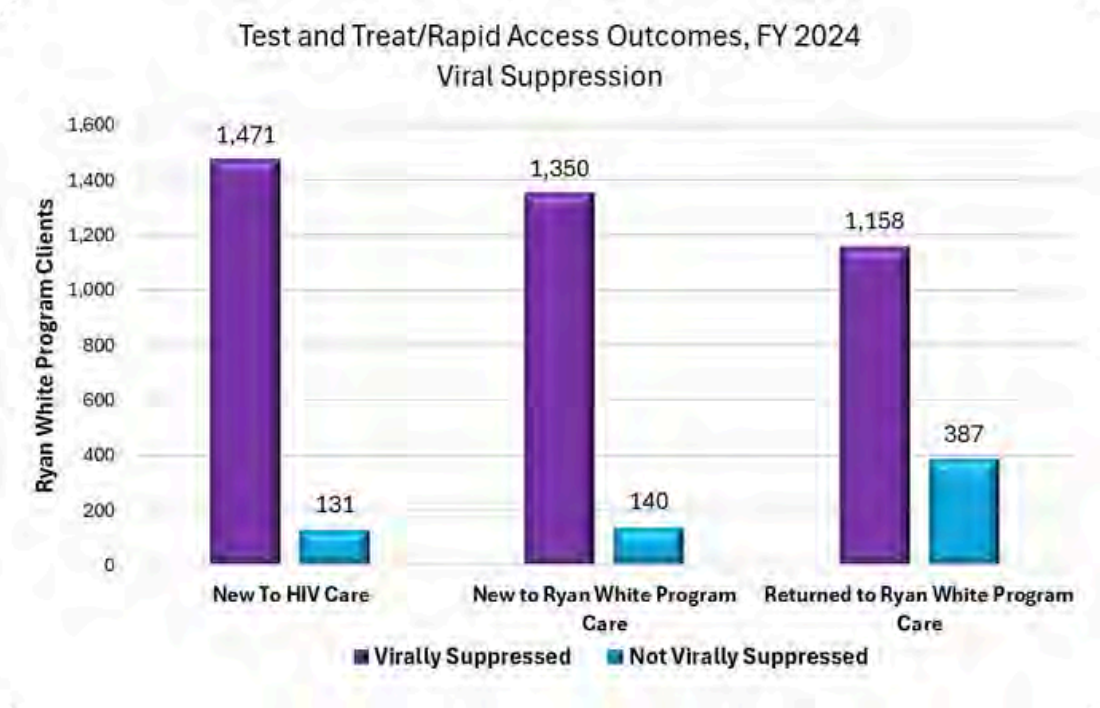
For the sixth year in a row (2019-2024), **no babies were born with HIV** to HIV positive mothers in Miami-Dade County, due in large part to initiatives funded by the Ryan White Program Part D at University of Miami – Miller School of Medicine, Department of OB-GYN and Reproductive Sciences.

Successful Outcomes

HIV Test & Treat/Rapid Access and Viral Suppression

4,703 people with HIV entered the Ryan White Program service system through the Test and Treat/Rapid Access protocol since its inception in July 2018, though the end of Fiscal Year 2024 (February 28, 2025).

The Test & Treat/Rapid Access protocol ensures access to medical care and antiretroviral therapy within 7 days as the standard of care for every person who was newly diagnosed or returning to care with HIV in Miami-Dade County since July 2018.



- **New to HIV Care:** Newly diagnosed or treatment naïve.
- **New to Ryan White Program Care:** Previously in treatment but had not received services through the Ryan White Program.
- **Returned to Ryan White Program Care:** Local Ryan White Program clients who had been lost to care and are now back in care.
- **Virally Suppressed:** Less than 200 copies of HIV per milliliter of blood.

According to the Prevention Access Campaign's U=U FAQs, "Since the development of combination therapy, there have been no confirmed reports of anyone with an undetectable viral load sexually transmitting HIV."

Successful Outcomes

Miami-Dade HIV/AIDS Partnership

Miami-Dade County's Official Ryan White Program Planning Council for HIV Prevention and Care.

Our vision is to eliminate disparities and improve health outcomes for all people living with or at risk for HIV/AIDS.

In 2024, more than 70 Partnership and Committee Members:

- Made decisions that impact the lives of **9,388 people** with HIV in Miami-Dade County!
- Expanded funding and access to Food Bank services.
- Convened a Countywide Housing Needs Survey and Housing Stakeholders Meeting.
- Monitored and evaluated 2022-2026 Miami-Dade County Integrated HIV Prevention and Care Plan goals and activities.
- Studied the local HIV epidemic through a series of data-intensive Needs Assessment meetings.
- Reviewed and updated the Ryan White Program Minimum Primary Medical Care Standards, Allowable Medical Conditions List, and locally funded Ryan White Part A/MAI Service Descriptions.
- Conducted an evaluation of the Ryan White Program Recipient for the Health Services and Resources Administration (HRSA).
- Revised and updated the Ordinance creating the Partnership, streamlining membership in accordance with HRSA legislation.
- Participated in Partnership member enrichment training sessions.

We are the Partnership!

We are people who care about people with HIV.

Our members are Ryan White Program clients, people with HIV, peer educators, service providers, medical case managers, doctors, pharmacists, government representatives, and more! Membership is open to anyone who is a permanent resident and registered voter in Miami-Dade County.

MIAMI-DADE HIV/AIDS PARTNERSHIP

Everyone has a role in ending the HIV epidemic!

Planning for the Future

We are closely monitoring proposed budget cuts and program changes, including:

- Eliminating **Minority AIDS Initiative** funding,
  - **$2.6 million** local funding cut to core medical and support services.
  - **More than 1,500 people** received Minority AIDS Initiative-funded services in FY 2024, including medical case management, mental health services, outpatient medical care, outpatient substance abuse care and medical transportation.

- Eliminating **Ending the HIV Epidemic** care and treatment funding.
  - **$4.4 million** are proposed to be cut from local testing and treatment funding.

- Ending current **High Impact Prevention** funding.
  - **More than 1,000 people** were newly identified as HIV positive in Miami-Dade County in 2023 (most recent date for available data).
  - Without High Impact Prevention funding,

- Merging the **Housing Opportunities for Persons With AIDS** (HOPWA) Program with Section 8 and other housing funding, reduce HOPWA rental assistance to a two-year cap ~ $532 million cut in nationwide funding.
  - **More than 700 low-income people** with AIDS are stably housed with the help of HOPWA Long-Term Rental Assistance.
  - **More than 40 low-income people** with AIDS are waiting for HOPWA housing.

- Eliminating Ryan White Program Part F ~ $74 million nation-wide funding cut.
- Cutting $3.1 billion from the CDC Global Health Center.
- Cutting $1.065 billion from SAMHSA programs.

We have made so much progress towards ending the HIV epidemic! We urge your support of the Ryan White Program, Minority AIDS Initiative Program, HOPWA, and HIV prevention funding!

Other Ways You Can Help Our Community

Get tested for HIV and promote HIV testing in your community!

- Locate an HIV testing site ~ www.testmiami.org.
- Visit www.aidsnet.org and learn how to be supportive when someone tells you they are HIV positive ~ www.aidsnet.org/hivresourcehub/#hivhubtesting.

Advocate for Zero HIV Stigma!

Ending HIV stigma is fundamental to attaining global HIV targets, promoting the U=U (Undetectable = Untransmittable) message, and achieving health-related prevention and care goals.

- Normalize "People First" language such as, "people with HIV" or "people experiencing homelessness".
- Please don't say, "infected" with HIV, instead, say "acquired HIV," "diagnosed with HIV," or "contracted HIV," or use stigmatizing terms such as "dirty", "clean," or "victim".
- Visit zerohivstigma.org/and www.cdc.gov/stophivtogether/hiv-stigma/index.html to learn more about how you can be an HIV Stigma Warrior!

Stay up to date on HIV prevention, care, and treatment initiatives!

- The Miami-Dade HIV/AIDS Partnership ~ www.aidsnet.org
- FDOH Community Health Assessment Resource Tool Set ~ www.flhealthcharts.gov
- Miami-Dade County Ryan White Program ~ www.miamidade.gov/global/grants.page
- Federal HIV/AIDS Web Council ~ www.HIV.gov
- Tools for HRSA's Ryan White HIV/AIDS Program ~ www.TargetHIV.org
- Undetectable =Untransmittable (U=U) ~ www.preventionaccess.org

Stay in touch!

(305) 445-1076
mdcpartnership@behavioralscience.com
www.facebook.com/HIVPartnership
www.instagram.com/hiv_partnership
www.aidsnet.org

PDF copies of this report are available from Behavioral Science Research Corp. at mdcpartnership@behavioralscience.com or (305) 445-1076, or scan the QR code for a PDF copy from www.aidsnet.org.

Scan for Meeting Documents

MIAMI-DADE HIV/AIDS PARTNERSHIP

Strategic Planning Committee

Tuesday, July 22, 2025
9:30 AM – 11:30 AM

Behavioral Science Research Corp.
2121 Ponce de Leon Boulevard, 2nd Floor Conference Room
Coral Gables, FL 33134

AGENDA

I.	Call to Order	Stephanie Stonestreet
II.	Introductions	All
III.	Meeting Housekeeping	Stephanie Stonestreet
IV.	Floor Open to the Public	Angela Machado
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of June 10, 2025	All
VII.	Reports ▪ Membership ▪ Partnership	Staff
VIII.	Standing Business ▪ 2024 Annual Report – State of the HIV Epidemic	All
IX.	New Business ▪ 2022-2026 Integrated Plan Monitoring and Reporting System Report ▪ 2027-2031 Integrated Plan Review	All
X.	Announcements and Open Discussion	All
XI.	Next Meeting: August 12, 2025, 9:30 AM at BSR Corp.	Angela Machado
XII.	Adjournment	Stephanie Stonestreet

Please mute or turn off all cellular devices.

For more information about the Strategic Planning Committee, please contact Christina Bontempo, (305) 445-1076 x106 or cbontempo@behavioralscience.com.

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Integrated Plan 2022-2026

NHAS Goal 2: Improve HIV-Related Health Outcomes of People with HIV

Status Color Legend			
Activity Not Started	Activity In Progress	Activity Delayed	Activity Complete
ON	ON	ON	ON

Objective 2.1	Expand capacity and access to local TTRA								
Strategy 2.1.1	Increase the number of new FDOH counseling and testing sites for vulnerable populations								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.1.1.1	Number of new FDOH counseling and testing sites serving vulnerable populations	48	Activity In Progress						
2.1.1.2	Programming in PE Miami to allow tracking of 'referral from' for RWP clients entering through TTRA	DONE	Activity Not Started						
2.1.1.3	Number of newly identified positive clients enrolled in TTRA services from new FDOH counseling and testing sites	246	Activity Delayed						
2.1.1.4	Percent of newly identified positive clients enrolled in TTRA services based on 2.1.1.3	75	Activity Delayed						

Objective 2.1	Expand capacity and access to local TTRA								
Strategy 2.1.2	Increase the number of referral relationships between hospital ERs and urgent care centers, and TTRA sites								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.1.2.1	Number of hospital ERs, hospital-based urgent care centers, and freestanding urgent care centers with TTRA referral mechanisms in place.	7	Activity In Progress						
2.1.2.2	Programming in PE Miami to allow tracking of 'referral from' for RWP clients entering through TTRA (see 2.1.1.2)	DONE	Activity Not Started						
2.1.2.3	Number of newly identified positive clients enrolled in TTRA services from hospital ERs, hospital-based urgent care centers, and freestanding urgent care centers	246	Activity Delayed						
2.1.2.4	Percent of clients enrolled in TTRA based on 2.1.2.3		Activity Delayed						

Objective 2.1	Expand capacity and access to local TTRA								
Strategy 2.1.3	Number of HIV education folders provided to EHE Quick Connect and TTRA testing sites								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.1.3.1	Number and listing of specific information dissemination to newly identified positive people with HIV	1	Activity Complete	0	0	1			
2.1.3.2	Number of trilingual (English, Spanish, and Creole) brochures designed for these specific campaigns.	2	Activity Complete	0	0	2 Total 1 targeted towards clients 1 targeted toward providers	1,156 HIV educational folders provided to EHE Quick Connect and TTRA testing sites		
2.1.3.3	Number of HIV education folders provided to EHE Quick Connect and TTRA testing sites	2,000	Activity In Progress	101	286	259	232	278	

Objective 2.1	Expand capacity and access to local TTRA								
Strategy 2.1.4	Educate private providers during the academic detailing visits on the benefits of TTRA								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.1.4.1	Number of private providers identified to be educated on routinized testing and TTRA services	1,776	Activity In Progress						
2.1.4.2	Number of private providers educated on routinized testing and TTRA services	1,776	Activity In Progress						
2.1.4.3	Number of private providers committed (with MOUs) to linking clients to TTRA services	592	Activity In Progress						

Objective 2.1	Expand capacity and access to local TTRA								
Strategy 2.1.5	Expand the use of Telehealth (HealthTec) to agencies and clients to reduce barriers to care for eligible patients								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.1.5.1	Number of people with HIV in the EMA who are identified as eligible for EHE HealthTec	TBD	Activity In Progress	40	80	55	67	63	
2.1.5.2	Number of people with HIV identified as eligible for EHE HealthTec who enroll in this process throughout the remainder of the five-year period of performance	412	Activity In Progress	21	60	28	39	56	
2.1.5.3	Number of EHE HealthTec clients continuing this process (i.e., one or more medical visits, CD4 tests, or VL tests within 30 days of the initial client orientation date, documented via follow-up with client or provider) throughout the remainder of the five-year period of performance	330	Activity In Progress	21	60	28	39	51	
2.1.5.4	Number of EHE HealthTec clients with a suppressed viral load at last VL test during the measurement year	297	Activity In Progress	6	31	18	76	116 - Pending Review	

Objective 2.1	Expand capacity and access to local TTRA								
Strategy 2.1.6	Implement the use of RWP-EHE Quick Connect services in hospitals, clinics, urgent care centers, and emergency rooms								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.1.6.1	Number of people with HIV in the EMA who contact or are contacted by an EHE Quick Connect team	430	Activity In Progress	2	33	31	60	71	
2.1.6.2	Number of people with HIV linked to HIV medical care in the RWP Part A/MAI; other community programs; or private insurance	430	Activity In Progress	2	33	31	60	65	
2.1.6.3	Number of EHE Quick Connect clients utilizing this process (i.e., one or more medical visits, CD4 tests, or VL tests within 30 days or less, documented via follow-up with client or provider) throughout the reminder of the five-year period of performance	322	Activity In Progress	1	23	30	45	71	

Objective 2.2	Provide socio-emotional support for newly identified positive persons with HIV as they move from counseling and testing to TTRA								
Strategy 2.2.1	Routinize a supportive warm hand off process for newly identified positive persons referred from counseling and testing sites sharing locations with TTRA								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.2.1.1	Number of Part A/MAI subrecipients with counseling and testing sites on-site with TTRA implementing the warm handoff as standard operating procedure	12	Activity Delayed						

Objective 2.3	Improve linkage to HIV health care within 30 days for all persons who are newly identified and confirmed positive for HIV								
Strategy 2.3.1	Track the 30 day linkage to medical care for clients with a confirmed positive HIV test result among counseling and testing sites in Miami-Dade County								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.3.1.1	Percent of persons newly identified positive with HIV who are linked to care within 30 days from their confirmed positive diagnosis, among individual counseling and testing sites	90%	Activity Not Started						

Objective 2.3	Improve linkage to HIV health care within 30 days for all persons who are newly identified and confirmed positive for HIV								
Strategy 2.3.2	Identify counseling and testing sites with lower than 90% 30-day linkage of eligible newly-diagnosed persons with confirmed positive diagnoses								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.3.2.1	Number of counseling and testing sites that fall below 90% 30-day linkage	TBD	Activity Not Started						
2.3.2.2	Percent of counseling and testing sites that fall below 90% 30-day linkage	TBD	Activity Not Started						

Objective 2.3	Improve linkage to HIV health care within 30 days for all persons who are newly identified and confirmed positive for HIV								
Strategy 2.3.3	Engage counseling and testing providers with 30-day linked-to-care rates lower than 90% in QI activities to raise their linkage rates								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.3.3.1	Number of counseling and testing sites with lower than 90% 30-day linkage who conducted a QI project to address linkage rates during the fiscal year	TBD	Activity Not Started						
2.3.3.2	Number of counseling and testing sites conducting a linkage rate QI project who increased their 30-day linkage rate by at least 10% over their baseline measurement	TBD	Activity Not Started						

Objective 2.3	Improve linkage to HIV health care within 30 days for all persons who are newly identified and confirmed positive for HIV								
Strategy 2.3.4	Counseling and testing sites will present their QI projects to other counseling and testing sites to share best practices to replicate								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.3.4.1	Number of meetings/training conducted each year	TBD	Activity Not Started						
2.3.4.2	Number of counseling and testing site attendees who participate in meetings/trainings on best practices	TBD	Activity Not Started						
2.3.4.3	Number of counseling and testing sites who adopted QI process improvements suggested by QI reports from participating counseling and testing providers	TBD	Activity Not Started						

Objective 2.4	Provide antiretroviral therapy for newly identified positive persons within seven days for persons entering RWP care through TTRA, or within 30 days for newly identified positive persons who enter RWP
Strategy 2.4.1	Established baselines for receipt of ARV medication (date of dispensed prescription, date of certified provision of samples by physician

Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.4.1.1	Number of newly identified clients enrolled in RWP	TBD	Activity In Progress						
2.4.1.2	Percent of TTRA enrolled clients with confirmed positive HIV diagnosis with verified receipt of ARV medication within seven days of enrollment	TBD	Activity In Progress						
2.4.1.3	Percent of non-TTRA enrolled clients with confirmed positive HIV diagnosis with verified receipt of ARV medication within 30 days of enrollment	TBD	Activity In Progress						

Objective 2.4	Provide antiretroviral therapy for newly identified positive persons within seven days for persons entering RWP care through TTRA, or within 30 days for newly identified positive persons who enter RWP
Strategy 2.4.2	Enroll clients in ADAP (or other ARV payer source as appropriate) within 30 days of receipt of initial ARV medication

Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.4.2.1	Number of newly identified positive RWP clients engaged through TTRA		Activity In Progress						
2.4.2.2	Percent of newly identified positive RWP clients engaged through TTRA enrolled in ADAP within 30 days of receipt of first ARV medication	100%	Activity In Progress						
2.4.2.3	Number of newly identified positive RWP clients not engaged through TTRA		Activity In Progress						
2.4.2.4	Percent of newly identified positive RWP clients not engaged through TTRA enrolled in ADAP within 30 days of receipt of first ARV medication	100%	Activity In Progress						

Objective 2.5	Identify and reengage clients in danger of being lost to RWP MCM care
Strategy 2.5.1	Improve lost to RWP MCM care rates among RWP MCM clients

Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.5.1.1	Establishment of '60-day no contact' notification protocol in PE Miami	Done	Activity Delayed						
2.5.1.2	Percent of RWP MCM clients with '60 day no-contact' by subrecipient	10%	Activity In Progress						
2.5.1.3	Number of RWP MCM clients with no RWP MCM contact in 90 days as tracked in PE Miami		Activity In Progress						975
2.5.1.4	Percent of RWP MCM clients contacted in 90 days	5%	Activity In Progress	89%	89%	90%	82%	86%	87%
2.5.1.5	Number of RWP MCM clients with no RWP MCM contact in 90 days who are re-engaged in care within 60 days following 'lost to care' 90-day indicator, as tracked in PE Miami		Activity In Progress						
2.5.1.6	Percent of RWP MCM clients with no RWP MCM contact in 90 days who are re-engaged in care within 60 days following 'lost to care' 90-day indicator as tracked in PE Miami	95%	Activity In Progress						

Objective 2.5	Identify and reengage clients in danger of being lost to RWP MCM care							
Strategy 2.5.2	Retain a minimum of 75% of newly enrolled RWP clients in medical case management for a minimum of six months (180 days) after enrollment in the RWP Program							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.5.2.1	Number of newly enrolled RWP clients		Activity In Progress	579	518	557	606	544	
2.5.2.2	Number of newly enrolled RWP clients retained in medical case management for 60 days after enrollment		Activity In Progress	545	477	514	561	474	
2.5.2.3	Percent of new-to-care and new-to-RWP clients retained in medical case management for 60 days after enrollment	75%	Activity In Progress	94%	92%	92%	93%	87%	
2.5.2.4	Number of new-to-care and new-to-RWP clients retained in medical case management for 180 days after enrollment		Activity In Progress	486	423	476	528	387	
2.5.2.5	Percent of new-to-care and new-to-RWP clients retained in medical case management for 180 days after enrollment	75%	Activity In Progress	84%	82%	85%	87%	71%	

Objective 2.6	Increase Peer (PESN) involvement in client care to improve retention and viral load suppression							
Strategy 2.6.1	Convene listening sessions among peers and peer supervisors to identify potential areas of increased peer involvement with client care, advanced peer skill development, and advanced peer skill certifica							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.6.1.1	Specification of peer certification and/or advanced peer certification areas identified by RWP and approved for training	Done	Activity Delayed						
2.6.1.2	Number of listening sessions conducted with peers	TBD	Activity Delayed						
2.6.1.3	Number of listening sessions conducted with peer supervisors	TBD	Activity Delayed						
2.6.1.4	Number of peers attending sessions	TBD	Activity Delayed						
2.6.1.5	Number of peer supervisors attending sessions	TBD	Activity Delayed						

Objective 2.6	Increase Peer (PESN) involvement in client care to improve retention and viral load suppression							
Strategy 2.6.2	Develop or identify peer certification and/or advanced peer certification training/resources; conduct training; and certify peers							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.6.2.1	Peer certification and/or advanced peer certification training curriculum developed or identified	Done	Activity Delayed						
2.6.2.2	Number of advanced certification trainings conducted annually	TBD	Activity Delayed						
2.6.2.3	Number of peers trained and certified annually	TBD	Activity Delayed						

Objective 2.6	Increase Peer (PESN) involvement in client care to improve retention and viral load suppression							
Strategy 2.6.3	Increase percent of time spent by Peers in adherence counseling to 75% among all subrecipients							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.6.3.1	Number of RWP Peers		Activity In Progress						
2.6.3.2	Number of RWP Peers billing at least 75% adherence counseling	See 2.6.3.1	Activity In Progress						
2.6.3.3	Percent of RWP Peers billing at least 75% adherence counseling	100%	Activity In Progress						
2.6.3.4	Number of clients with documented peer contact once every 90 days		Activity In Progress						
2.6.3.5	Percent of clients with documented peer contact once every 90 days who are retained in medical care	90%	Activity In Progress						
2.6.3.6	Percent of clients with documented peer contact once every 90 days with suppressed VLs	95%	Activity In Progress						

Objective 2.7	Ensure a 'whole person' holistic treatment approach that recognizes that care for RWP clients must go beyond viral load suppression and retention in care								
Strategy 2.7.1	Develop guidelines and procedures for RWP MCMs to facilitate client access to RWP services (e.g. specialty medical services; mental health services; food bank; and substa								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.7.1.1	Conduct review with RWP MCMs, RWP MCM Supervisors and Recipient to determine areas where facilitating client access may be built into RWP MCM activities and documented in PE Miami	Done	Activity Delayed						
2.7.1.2	Number of annual training sessions with RWP MCM Supervisors to build RWP MCM capacity to facilitate client access	4	Activity Delayed						
2.7.1.3	Number of annual training sessions with RWP MCMs to build capacity to facilitate client access	4	Activity Delayed						

Objective 2.7	Ensure a 'whole person' holistic treatment approach that recognizes that care for RWP clients must go beyond viral load suppression and retention in care								
Strategy 2.7.2	Develop guidelines and procedures for RWP MCMs to identify and address the impact of social determinants of health (e.g., childcare, housing, food insecurity, domestic violence, discrimination and othe								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.7.2.1	Conduct review with RWP MCMs, RWP MCM Supervisors and Recipient to determine areas where social determinants of health are identified in PE Miami and may be addressed in RWP MCM activities	Done	Activity Delayed						
2.7.2.2	Number of annual training sessions with RWP MCM Supervisors to build RWP MCM capacity to address social determinants of health	4	Activity In Progress						
2.7.2.3	Number of annual training sessions with RWP MCMs to build RWP MCM capacity to address social determinants of health	4	Activity In Progress						

Objective 2.7	Ensure a 'whole person' holistic treatment approach that recognizes that care for RWP clients must go beyond viral load suppression and retention in care								
Strategy 2.7.3	Develop or identify protocols for how mental health services are destigmatized ('normalized') and integrated into RWP provider activity, to reduce barriers to clients making use of them								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.7.3.1	Number of subrecipients with protocols developed for destigmatizing mental health services	13	Activity Not Started						
2.7.3.2	Number of subrecipients documenting the application of destigmatizing protocols	13	Activity Not Started						

Objective 2.7	Ensure a 'whole person' holistic treatment approach that recognizes that care for RWP clients must go beyond viral load suppression and retention in care								
Strategy 2.7.4	Create and maintain a Miami-Dade community information resource hub to serve as an RWP MCM resource for whole-client referrals								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.7.4.1	Number of resource hubs created and available to RWP MCMs and RWP MCM supervisors	1	Activity Complete						
2.7.4.2	Number of RWP MCM subrecipient providers aware of and committed to using the resource hub	13	Activity In Progress						

Objective 2.8	Improve health outcomes for women with HIV								
Strategy 2.8.1	Evaluate existing programs and services for women with HIV								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.8.1.1	Conduct Needs Assessment	Done	Activity Not Started						
2.8.1.2	Identify specific issues related to women in care with HIV	Done	Activity Not Started						
2.8.1.3	Number of RWP MCM agencies with clients with identified needs		Activity Not Started						
2.8.1.4	Percent of RWP MCM agencies with clients with identified needs		Activity Not Started						
2.8.1.5	As needed, implement QI projects		Activity Not Started						

Objective 2.8	Improve health outcomes for women with HIV								
Strategy 2.8.2	Educate RWP subrecipients and medical care providers on special dynamics of women with HIV								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.8.2.1	Identify specific issues related to women in HIV care	Done	Activity Not Started						
2.8.2.2	Identify or develop training curricula needed to address these issues	Done	Activity Not Started						
2.8.2.3	Conduct annual training in women's needs among RWP MCM subrecipients	Done	Activity Not Started						
2.8.2.4	Percent of RWP MCM subrecipients receiving training on issues related to women in HIV care	13	Activity Not Started						

Objective 2.9	Improve health outcomes for adults over age 50 with HIV								
Strategy 2.9.1	Examine client health outcome data for RWP MCM clients over age 50								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.9.1.1	Number of RWP MCM clients over age 50		Activity In Progress	2673	2805	2889	3064	3310	3311
2.9.1.2	Percent of RWP MCM clients over age 50 RiMC	90%	Activity In Progress	88%	88%	88%	88%	92%	89%
2.9.1.3	Percent of RWP MCM clients over age 50 virally suppressed	95%	Activity In Progress	93%	92%	93%	95%	94%	93%
2.9.1.4	Number of RWP MCM providers with clients over age 50 with RiMC rates below RWP system target rates.		Activity In Progress	9	8	5	7	6	6
2.9.1.5	Identify potential QI opportunities to improve client health outcomes	Done	Activity In Progress						

Objective 2.9	Improve health outcomes for adults over age 50 with HIV								
Strategy 2.9.2	Examine client health outcome data for RWP OAHS clients over age 50								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.9.2.1	Number of RWP OAHS clients over age 50		Activity In Progress	1285	1270	1306	1335	1407	1386
2.9.2.2	Percent of RWP OAHS clients over age 50 RiMC	90%	Activity In Progress	91%	91%	92%	90%	93%	93%
2.9.2.3	Percent of RWP OAHS clients over age 50 virally suppressed	95%	Activity In Progress	92%	91%	92%	94%	93%	94%
2.9.2.4	Number of RWP OAHS providers with clients over age 50 with RiMC rates below RWP system target rates.		Activity In Progress	7	7	4	5	3	6
2.9.2.5	Identify potential QI opportunities to improve client health outcomes	Done	Activity In Progress						

Objective 2.9	Improve health outcomes for adults over age 50 with HIV								
Strategy 2.9.3	Conduct 'Aging HIV Community' needs assessment								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.9.3.1	Conduct Client Satisfaction surveys with RWP clients over age 50		Activity Complete						
2.9.3.2	Hold focus groups or listening sessions directed toward needs of clients over 50 years of age	Done	Activity Complete	Done					
2.9.3.3	Hold Community Coalition Roundtable meeting focused on persons in the affected community over 50 years of age	Done	Activity Complete	Done					

Objective 2.9	Improve health outcomes for adults over age 50 with HIV								
Strategy 2.9.4	Develop special mental health and social services recommendations for people over age 50 with HIV								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.9.4.1	Distribute guidelines or protocols generated by Care and Treatment Committee and Partnership	Done	Activity Complete					Dear Colleague Letter Distributed	

Objective 2.9	Improve health outcomes for adults over age 50 with HIV								
Strategy 2.9.5	Ensure eligible clients aged 65+ are enrolled in Medicare								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.9.5.1	Number of RWP MCM clients over age 65		Activity In Progress	422	439	447	461	589	473
2.9.5.2	Number of RWP MCM clients over age 65 with a Medicare marker in PE Miami		Activity In Progress	190	201	204	205	279	230
2.9.5.3	Percent of RWP MCM clients over age 65 with a Medicare marker in PE Miami	100%	Activity In Progress	45%	46%	46%	44%	47%	49%
2.9.5.4	Address deficiencies in Medicare enrollment with individual subrecipients	Done (Ongoing)	Activity In Progress						

Objective 2.10	Improve health outcomes for people with HIV experiencing HOMELESSNESS								
Strategy 2.10.1	Examine client health outcome data for RWP MCM clients experiencing HOMELESSNESS								
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.10.1.1	Number clients in RWP MCM care experiencing homelessness		Activity In Progress	87	106	119	158	189	236
2.10.1.2	Number of clients in RWP MCM care experiencing homelessness with a suppressed viral load		Activity In Progress	62	77	95	131	154	188
2.10.1.3	Percent of clients in RWP MCM care experiencing homelessness with a suppressed viral load	75%	Activity In Progress	71%	73%	80%	83%	81%	80%
2.10.1.4	Number of clients in RWP MCM care experiencing homelessness RiMC		Activity In Progress	75	84	103	133	145	173
2.10.1.5	Percent of clients in RWP MCM care experiencing homelessness RiMC	75%	Activity In Progress	86%	79%	87%	84%	77%	73%

Objective 2.10	Improve health outcomes for people with HIV experiencing HOMELESSNESS							
Strategy 2.10.2	Support existing programs and collaborations							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.10.2.1	Review RWP MCM protocols for identifying clients who are experiencing homelessness to secure housing and support services	TBD	Activity Not Started						
2.10.2.2	Educate homelessness service providers and/or collaborators on special needs of people with HIV who are experiencing homelessness	Done (Annually)	Activity In Progress						Housing Stakeholders Meeting facilitated by the Housing Committee
2.10.2.3	Disseminate resources to access assistance for homelessness to RWP providers and upload resources to the Planning Council Resource Hub	Ongoing	Activity In Progress	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing
2.10.2.4	Other activities? Do we want to consider specific interventions that address health outcomes of persons with HIV and identified housing needs?	TBD	Activity Not Started						

Objective 2.11	Improve health outcomes for people with HIV experiencing HOUSING INSTABILITY							
Strategy 2.11.1	Examine client health outcome data for RWP MCM clients experiencing HOUSING INSTABILITY							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.11.1.1	Number clients in RWP MCM care experiencing housing instability		Activity In Progress	112	122	131	148	152	179
2.11.1.2	Number of clients in RWP MCM care experiencing housing instability with a suppressed viral load		Activity In Progress	89	96	113	130	131	151
2.11.1.3	Percent of clients in RWP MCM care experiencing housing instability with a suppressed viral load	80%	Activity In Progress	79%	79%	86%	88%	86%	84%
2.11.1.4	Number of clients in RWP MCM care experiencing housing instability RiMC		Activity In Progress	91	103	116	125	129	137
2.11.1.5	Percent of clients in RWP MCM care experiencing housing instability RiMC	80%	Activity In Progress	81%	84%	89%	84%	85%	77%

Objective 2.11	Improve health outcomes for people with HIV experiencing HOUSING INSTABILITY							
Strategy 2.11.2	Support existing programs and collaborations							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.11.2.1	Review RWP MCM protocols for identifying clients who are unstably housed to secure housing and support services	TBD	Activity Not Started						
2.11.2.2	Educate homelessness service providers and/or collaborators on special needs of people with HIV who are unstably housed	Annually	Activity In Progress						Housing Stakeholders Meeting facilitated by the Housing Committee
2.11.2.3	Disseminate resources to access assistance for housing instability to RWP providers and upload resources to the Planning Council Resource Hub	Ongoing	Activity In Progress	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing
2.11.2.4	Other activities? Do we want to consider specific interventions that address health outcomes of persons with HIV and identified housing instability needs?	TBD	Activity Not Started						

Objective 2.12	Improve health outcomes for clients in RWP MCM care							
Strategy 2.12.1	Examine client health outcome data for males with HIV in RWP MCM care							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.12.1.1	Number male clients in RWP MCM care		Activity In Progress	4251	4675	4982	5599	5890	6392
2.12.1.2	Number of male clients in RWP MCM care with a suppressed viral load		Activity In Progress	3846	4233	4589	5223	5469	5885
2.12.1.3	Percent of male clients in RWP MCM care with a suppressed viral load	95%	Activity In Progress	90%	91%	92%	93%	93%	92%
2.12.1.4	Number of male clients in RWP MCM care meeting RiMC		Activity In Progress	3533	3962	4265	4757	5229	5517
2.12.1.5	Percent of male clients in RWP MCM care meeting RiMC	90%	Activity In Progress	83%	85%	86%	85%	89%	86%

Objective 2.12	Improve health outcomes for clients in RWP MCM care							
Strategy 2.12.2	Examine client health outcome data for females with HIV in RWP MCM care							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.12.2.1	Number female clients in RWP MCM care		Activity In Progress	985	1041	1093	1256	1364	1400
2.12.2.2	Number of female clients in RWP MCM care with a suppressed viral load		Activity In Progress	879	944	1000	1155	1234	1247
2.12.2.3	Percent of female clients in RWP MCM care with a suppressed viral load	95%	Activity In Progress	89%	91%	91%	92%	90%	89%
2.12.2.4	Number of female clients in RWP MCM care meeting RiMC		Activity In Progress	863	901	934	1065	1193	1206
2.12.2.5	Percent of female clients in RWP MCM care meeting RiMC	90%	Activity In Progress	88%	87%	85%	85%	87%	86%

Objective 2.12	Improve health outcomes for clients in RWP MCM care							
Strategy 2.12.3	Examine client health outcome data for males with HIV in RWP OAHS care							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.12.3.1	Number male clients in RWP OAHS care		Activity In Progress	2432	2643	2825	3016	3090	2944
2.12.3.2	Number of male clients in RWP OAHS care with a suppressed viral load		Activity In Progress	2166	2359	2575	2812	2845	2726
2.12.3.3	Percent of male clients in RWP OAHS care with a suppressed viral load	95%	Activity In Progress	89%	89%	91%	93%	92%	93%
2.12.3.4	Number of male clients in RWP OAHS care meeting RiMC		Activity In Progress	2024	2255	2466	2634	2747	2637
2.12.3.5	Percent of male clients in RWP OAHS care meeting RiMC	90%	Activity In Progress	83%	85%	87%	87%	89%	90%

Objective 2.12	Improve health outcomes for clients in RWP MCM care							
Strategy 2.12.4	Examine client health outcome data for females with HIV in RWP OAHS care							
Activity #	Activity	Target	Status	Measurement P1: Jan 1, 2022-Jun 30, 2022	Measurement P2: Jul 1, 2022-Dec 31, 2022	Measurement P3: Jan 1, 2023-Jun 30, 2023	Measurement P4: Jul 1, 2023-Dec 31, 2023	Measurement P5: Jan 1, 2024-Jun 30, 2024	Measurement P6: Jul 1, 2024-Dec 31, 2024
2.12.4.1	Number female clients in RWP OAHS care		Activity In Progress	591	600	644	738	708	727
2.12.4.2	Number of female clients in RWP OAHS care with a suppressed viral load		Activity In Progress	515	530	581	672	637	652
2.12.4.3	Percent of female clients in RWP OAHS care with a suppressed viral load	95%	Activity In Progress	87%	88%	90%	91%	90%	90%
2.12.4.4	Number of female clients in RWP OAHS care meeting RiMC		Activity In Progress	519	536	568	654	624	653
2.12.4.5	Percent of female clients in RWP OAHS care meeting RiMC	90%	Activity In Progress	88%	89%	88%	89%	88%	90%

Scan for Meeting Documents

MIAMI-DADE HIV/AIDS PARTNERSHIP

Strategic Planning Committee

Tuesday, July 22, 2025
9:30 AM – 11:30 AM

Behavioral Science Research Corp.
2121 Ponce de Leon Boulevard, 2nd Floor Conference Room
Coral Gables, FL 33134

AGENDA

I.	Call to Order	Stephanie Stonestreet
II.	Introductions	All
III.	Meeting Housekeeping	Stephanie Stonestreet
IV.	Floor Open to the Public	Angela Machado
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of June 10, 2025	All
VII.	Reports ▪ Membership ▪ Partnership	Staff
VIII.	Standing Business ▪ 2024 Annual Report – State of the HIV Epidemic	All
IX.	New Business ▪ 2022-2026 Integrated Plan Monitoring and Reporting System Report ▪ 2027-2031 Integrated Plan Review	All
X.	Announcements and Open Discussion	All
XI.	Next Meeting: August 12, 2025, 9:30 AM at BSR Corp.	Angela Machado
XII.	Adjournment	Stephanie Stonestreet

Please mute or turn off all cellular devices.

For more information about the Strategic Planning Committee, please contact Christina Bontempo, (305) 445-1076 x106 or cbontempo@behavioralscience.com.

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~ AUGUST 2025 ~ Miami-Dade HIV/AIDS Partnership Calendar ~

Monday	Tuesday	Wednesday	Thursday	Friday
MEETING LOCATIONS **BSR Corp. ~ Behavioral Science Research Corp.,** 2121 Ponce de Leon Boulevard, Suite 240, Coral Gables, FL 33134 **Care Resource Community Health Centers,** Midtown Miami, 3510 Biscayne Boulevard, 1st Floor Community Room, Miami, FL 33137 **Miami-Dade County Main Library**, 101 West Flagler Street, Auditorium, Miami, FL 33130 **Report for Action!** Microsoft Teams, ID: 238 353 321 012; Passcode: pW9t2mR7				**1** **Report for Action!** **August Partnership Meeting Briefing** 12:00 PM to 12:30 PM via Microsoft Teams
4 **Miami-Dade HIV/AIDS Partnership** 10:00 AM to 12:00 PM at MDC Main Library	**5**	**6** **Get on Board!** **Planning Council Member Enrichment Training** 12:00 PM to 1:00 PM via Microsoft Teams	**7**	**8**
11	**12** **Strategic Planning Committee** 9:30 AM to 11:30 AM at BSR Corp	**13**	**14** **Care & Treatment Committee** **Annual Needs Assessment/PSRA** 10:00 AM to 1:00 PM at Care Resource	**15**
18 Ryan White Program 35th Anniversary	**19**	**20** Southern HIV/AIDS Awareness Day	**21** **Housing Committee** 2:00 PM to 4:00 PM at Care Resource	**22** **Medical Care Subcommittee** 9:30 AM to 11:30 AM at BSR Corp.
25 **Community Coalition Roundtable** 5:00 PM to 7:00 PM (Dinner at 4:30 PM) at Care Resource	**26**	**27** National Faith HIV/AIDS Awareness Day **Executive Committee** **As Needed**	**28** **Prevention Committee***	**29**

MIAMI-DADE HIV/AIDS PARTNERSHIP

The Miami-Dade HIV/AIDS Partnership is the Official Ryan White Program Planning Council in Miami-Dade County. Our members are people with HIV and people who care about people with HIV!

People with HIV are encouraged to participate!

All events on this calendar are open to the public.

RSVP

Your participation matters! Please let us know if you're coming to the meeting!

RSVP to (305) 445-1076 or mdcpartnership@behavioralscience.com

Be prepared!

Go to www.aidsnet.org or click on your meeting for agendas, minutes, and meeting documents.

Stay connected!

*Prevention Committee activities are suspended until further notice.

Information on this calendar is subject to change. **Version 06/10/25**

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sukriya
kop khun krap
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